

Integrated Performance Report - Metrics

September 2023



Improving Services
& Delivering
Outcomes
(Our Performance)

(System Resources Committee)

Our People

(People Committee)

Quality
(Safety, Experience
and Effectiveness)

(Quality Committee)


Finance and Use of
Resources

(System Resources Committee)

Summary



Metrics Overview

- The metrics we are reporting align to the commitments stated in the Joint Forward Plan.  Indicates a metric from within the Joint Forward Plan.
- The following metrics have not yet been incorporated and will be included in future versions of the report:
 - *Reduce waiting time for assessments for children and young people in key services (this will include CAMHS, eating disorders, and neurodiversity)*
 - *Maintain 70% of urgent community response cases responded to in 2 hours*
 - *Increase the percentage of people dying in their preferred place of death*
 - *Increase the percentage of cancer cases diagnosed at stages 1 or 2 (to be picked up in Public Health outcomes report)*
 - *Increase the uptake rates for cervical, breast and bowel screening (to be picked up in Public Health outcomes report)*
 - *Increase the percentage of hypertension patients who are treated to target as per NICE guidance (to be picked up in Public Health outcomes report)*
 - *Increase the proportion of people aged 25-84 with a CVD risk score greater than 20% on lipid lowering therapies (to be picked up in Public Health outcomes report)*
 - *Diabetes and respiratory (additional measures to be confirmed)*
 - *Ensure that at least 75% of people on the GP learning disability register over the age of 14 have had an annual health check and health plan in 23/24*
 - *Reduce reliance on inpatient care for patients with a learning disability and/or autism per million head of the population to meet an overall target of less than 30/million (total population)*
 - *Improve waiting times for autism and ADHD diagnosis*
 - *Maintain the access rates of children and young people accessing mental health services*
 - *Increase the percentage of the estimated eligible population receiving a formal dementia diagnosis to 66.7% by March 2024*
 - *Reduce the proportion of adults in mental health inpatient settings with a length of stay over 60 days and 90 days*
 - *Eliminate waits for treatment over 65 weeks for elective care by March 2024*
 - *Maintain theatre utilisation at or above 85% for elective theatres throughout 23/24*
 - *Increase virtual ward beds to 223 and increase utilisation to 80% by December 2023*

Metrics Overview (cont.)

The following metrics have not yet been incorporated and will be included in future versions of the report (continued):

- *Reduce the number of inpatients with no-criteria to reside to 160 or less by November 2023*
- *Reduce the percentage of inpatients with a stay of 21 days or longer by 15% or less by November 2023*
- *Increase the percentage of regular GP practice appointments in 14 days*
- *Increase units of dental activity delivered as a proportion of all units of dental activity contracted*
- *Maintain number of GP appointments*
- *Antimicrobial resistance – Reduce total prescribing of antibiotics in primary care*
- *Reduce proportion of broad-spectrum antibiotic prescribing in primary care*
- *Increase referrals to Community Pharmacy Consultation service in line with operational plan*
- *Increase GP referrals to the NHS digital weight management service*

Workforce Metrics

- *Reduce expenditure on third party staffing agencies as determined by partner organisations*
- *Maximise our use of the apprenticeship levy as determined by partner organisations*
- *Increase direct patient care staff in GP practices and PCNs per 10,000 weighted population*

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Performance Metrics



Urgent & Emergency Care - Attendances

Indicator	Metric	Good is	National Target	Latest Performance	Trend	Latest Reporting Period	Latest Benchmarking			Reporting Period	Dashboard Link
							better than	worse than	Quartile Q1 = High Q4 = Low		
◆	A&E 4 Hour Target - % seen, treated and discharged/admitted within 4 hours of arrival to A&E (Type 1)	High	95.0%	56.69 Gloucester ICS		August 2023	56.69 Gloucester ICS	57.06 Other South West ICS	59.02 All ICS	August 2023	
	A&E 4 Hour Target - % seen, treated and discharged/admitted within 4 hours of arrival to A&E (Type 3)	High	95.0%	99.85 GHFT		July 2023	99.85 GHFT		96.03 All ICS	July 2023	
	S019a Ambulance Handovers - Total resource time lost	Low		12702 GHFT		August 2023					
	ED Assessment - % patients assessed within 15 minutes of arrival at A&E	High		47.78 Gloucester ICS		July 2023					
	S103a 12 Hour ED Waits - Proportion of patients spending more than 12 hours in an emergency department	Low	8.0%	30.82 GHFT		July 2023					
◆	Overnight General & Acute Beds Available and Occupied										
	111 Call Abandonment	Low	3	16.90 Value		July 2023					







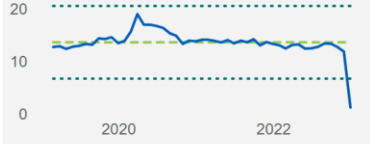

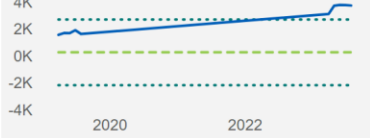

Type 1 and Type 3 ED activity are combined to give the system ED performance (this metric is the 80.4% target quoted in the JFP).

Urgent & Emergency Care - Ambulance



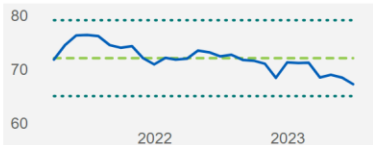

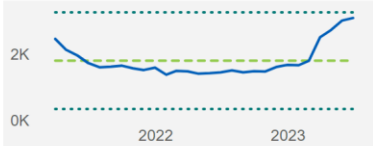





Indicator	Metric	Good is	National Target	Latest Performance	Trend	Latest Reporting Period	Latest Benchmarking			Reporting Period	Dashboard Link
							better than	worse than	Quartile Q1 = High Q4 = Low		
S020a	Average Ambulance Response Times (Category 1)	Low	7 minutes	00:09:29 Gloucester ICS		August 2023	00:09:49 Gloucester ICS	00:09:18 SWASFT	00:08:21 England	July 2023	
S020b	Average Ambulance Response Times (Category 2)	Low	18 minutes	00:29:48 Gloucester ICS		August 2023	00:33:14 Gloucester ICS	00:35:42 SWASFT	00:31:50 England	July 2023	
S020c	Average Ambulance Response Times (Category 3)	Low	120 minutes	01:10:56 Gloucester ICS		August 2023	01:25:56 Gloucester ICS	01:30:09 SWASFT	01:50:09 England	July 2023	
S020d	Average Ambulance Response Times (Category 4)	Low	180 minutes	01:18:13 Gloucester ICS		August 2023	01:49:24 Gloucester ICS	01:34:14 SWASFT	02:21:19 England	July 2023	
	Ambulance Conveyance Rates (% incidents conveyed)	Low		46.70 Gloucester ICS		August 2023	47.01 Gloucester ICS	52.85 Other South West ICS	57.54 England	July 2023	


The expectation for 23/24 is to improve to 30 minutes Category 2 response time













	Indicator	Metric	Good is	National Target	Latest Performance	Trend	Latest Reporting Period	Latest Benchmarking				Reporting Period	Dashboard Link
								better than	worse than	Quartile Q1 = High Q4 = Low			
◆	S007a	Elective activity - ERF (% weighted cost activity vs 19/20 baseline)	High	105%	105%		July 2023						
		Outpatient follow up ratio	Low		0.63 GHFT		July 2023						
		Virtual Outpatient Appointments - % of outpatient activity which is virtual/telephone	High	25.0	18.39 GHFT		July 2023						
◆	E.M.34	PIFU - % of all outpatient appointments moved or discharged to PIFU	High	5.0	1.16 Gloucester ICS		January 2023						
	S016a	A&G - Number of patients receiving Advice and Guidance	High		339 GHFT		August 2023						

The national target for ERF is currently 105% of 2019 cost weighted activity (taking into account baseline changes) – this has been reduced from 109% due to industrial action.


Planned Care & Elective Recovery - RTT

Indicator	Metric	Good is	National Target	Latest Performance	Trend	Latest Reporting Period	Latest Benchmarking				Reporting Period	Dashboard Link
							better than	worse than	Quartile Q1 = High Q4 = Low			
	RTT (18 week) - % waiting list waiting under 18 weeks	High	92.0%	67.18 Gloucester ICS		July 2023	67.18 Gloucester ICS				July 2023	
S009a	RTT (52 week waits) - Number of patients on RTT list >52 weeks	Low	0	3096 GHFT		July 2023	3096 GHFT				July 2023	
S009b	RTT (78 week waits) - Number of patients on RTT list >78 weeks	Low	0.0	16 GHFT		July 2023	16 GHFT				July 2023	
S009c	RTT (104 week waits) - Number of patients on RTT list >104 weeks	Low	0.0	0 Gloucester ICS		July 2023	0 Gloucester ICS				July 2023	

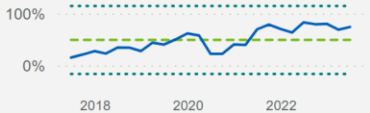



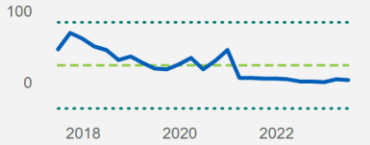



Indicator	Metric	Good is	National Target	Latest Performance	Trend	Latest Reporting Period	Latest Benchmarking			Reporting Period	Dashboard Link
							better than	worse than	Quartile Q1 = High Q4 = Low		
	2 Week Wait - % patients seen or STT within 2 weeks of referral	High	93.0%	96.81 Gloucester ICS		July 2023		58.17 Other South West ICS	80.52 All ICS	June 2023	
	S012a 28 day Faster Diagnosis - % patients receiving diagnosis or all clear within 28 days of referral	High	75.0%	78.77 GHFT		July 2023		71.42 Other South West ICS	73.49 All ICS	June 2023	
	S010a 31 day Treatment - activity	High		377 GHFT		July 2023		505.67 Other South West ICS	561.00 All ICS	June 2023	
	31 day Treatment - % patients receiving treatment within 31 days of DTT	High	96.0%	93.10 Gloucester ICS		July 2023		92.47 Other South West ICS	91.35 All ICS	June 2023	
	S011a 62 day Treatment - patient waiting list number beyond 62 days	Low	180	178 GHFT		July 2023					
	62 day Treatment - % patients receiving treatment within 62 days of referral	High	85.0%	66.27 GHFT		July 2023		62.20 Other South West ICS	59.24 All ICS	June 2023	

Indicator	Metric	Good is	National Target	Latest Performance	Trend	Latest Reporting Period	Latest Benchmarking				Reporting Period	Dashboard Link
							better than	worse than	Quartile Q1 = High Q4 = Low			
 S013	Activity - % activity vs 19/20 baseline	High		19.02 Gloucester ICS		July 2023						
	Waiting Times - % patients waiting more than 6 weeks for diagnostic test	Low	1%	15.53		July 2023						
S013a	Diagnostic Activity Levels - imaging	High		5447 GHFT		July 2023						
S013b	Diagnostic Activity Levels - physiological measurement	High		1208 Gloucester ICS		July 2023						
S013c	Diagnostic Activity Levels - endoscopy	High		1751 GHFT		July 2023						

The expectation for 23/24 is that performance against 6 week waits will improve to 15%

Indicator	Metric	Good is	National Target	Latest Performance	Trend	Latest Reporting Period	Latest Benchmarking				Reporting Period	Dashboard Link
							better than	worse than	Quartile Q1 = High Q4 = Low			
S081a	IAPT Access - Number of patients accessing IAPT in year	High	14,573	14,307 Value		July 2023	14K Value				July 2023	
S082a	IAPT Recovery - % patients entering recovery following IAPT	High	50	52.90 Value		July 2023	52.90 Value				July 2023	
E.H.13	SMI Physical Health Checks - % SMI register receiving/declining full health check	High	60	58 Value		Q1 23/24	58 Value					
E.H.30	Inpatient Follow Up - % patients receiving follow up within 72 hours of discharge	High	80	85.00 Gloucester ICS		May 2023	85.00 Gloucester ICS		76.08 All ICS		May 2023	
S086a	Out of Area Placement Bed Days - inappropriate OAP bed days for adults that are either 'internal' or 'external' to the sending provider	Low	800	639 Value		August 2023	639 Value				August 2023	
	Access to Core Community Mental Health Services - rate per 1,000 of patients accessing service	High	1	9.29 GHFT		May 2023	9.29 GHFT		61.27 All ICS		June 2023	

Indicator	Metric	Good is	National Target	Latest Performance	Trend	Latest Reporting Period	Latest Benchmarking			Reporting Period	Dashboard Link
							better than	worse than	Quartile Q1 = High Q4 = Low		
	E.H.15	Perinatal Access - % pregnant women accessing perinatal mental health service	High	3.08 Gloucester ICS		May 2023	3.08 Gloucester ICS	0.00 Other South West ICS	9.21 All ICS	May 2023	
	S021a	Continuity of Care Pathway - % of women on CoC pathway	High	51		July 2023					
		Smoking in Pregnancy - % SATOD	Low	8		July 2023					
	S116b	Smoking Cessation Services - proportion of acute/maternity inpatient settings offering smoking cessation services	High								
	S022a	Stillbirth rate	Low	0.00 GHFT		July 2023					
	S032a	Neonatal mortality rate	Low	0.00 GHFT		July 2023					
		Brain Injury Rate	Low	0.00 GHFT		July 2023					

Indicator	Metric	Good is	National Target	Latest Performance	Trend	Latest Reporting Period	Latest Benchmarking				Reporting Period	Dashboard Link
							better than	worse than	Quartile Q1 = High Q4 = Low			
	Referral Completion - % referrals completed within 28 days of referral	High	80.0%	74.24% Gloucester ICS		June 2023	74.24% Gloucester ICS		73.94% England		June 2023	
	Place of Assessment - % assessments in hospital	Low		0.00% Gloucester ICS		June 2023	0.00% Gloucester ICS		0.20% England		June 2023	
	Long waits - number of cases waiting > 12 weeks	Low		3 Gloucester ICS		June 2023	3 Gloucester ICS		590 England		June 2023	
	Conversion Rate - % referrals converted to CHC	Low		4.55% Gloucester ICS		June 2023	4.55% Gloucester ICS		17.50% England		June 2023	

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Workforce Metrics



Gloucestershire ICS Workforce Performance Dashboard

Leavers Rate (%)

13.8!

Last value (diff): 13.0 (-0.76)
July 2023

Leavers Rate (%)

[with <1ys LOS]

20.8✓

Last value (diff): 22.4 (+1.57)
July 2023

Sickness Rate (%)

4.1!

Last value (diff): 3.9 (-0.27)
July 2023

Net Change (%)

[Leaving/Joining]

3.6✓

Last value (diff): 6.7 (+3.14)
July 2023

Vacancy Rate (%)

13.6!

Last value (diff): 13.5 (-0.15)
July 2023

Bank Usage (FTE)

1,019.7✓

Last value (diff): 975.6 (+44.13)
July 2023

Agency Usage (FTE)

498.6✓

Last value (diff): 508.7 (+10.11)
July 2023

ICS PROVIDERS

Filters

- ☒ Select all
- ☒ NHS Providers
 - ☒ GHC
 - ☒ GHFT
- ☒ Social Care
 - ☒ Adults
 - ☒ Children

Disclaimer

- The data included in this dashboard is not currently available for Primary Care or NHS Gloucestershire
- Social Care data is provided quarterly but distributed monthly for visual consistency
- Missing values are filled in with an aggregated average for visual consistency
- The rates are calculated using a 12-month rolling average
- The temporary staffing data is based on monthly usage

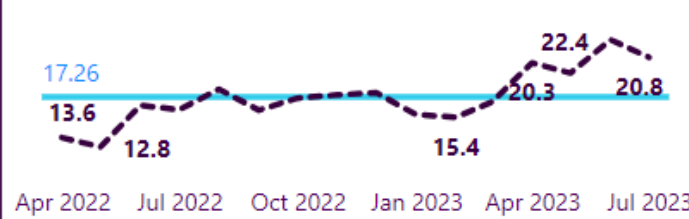
Average Leavers Rate (%)

(From Apr 2022)



Average Leavers Rate (%) with <1 yr LOS

(From Apr 2022)



Average Sickness Rate (%)

(From Apr 2022)



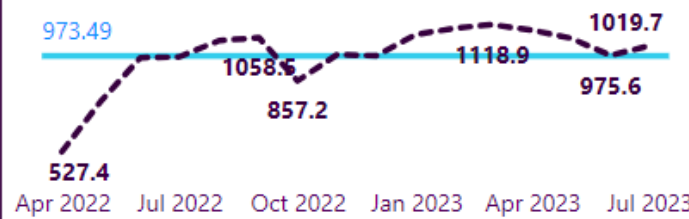
Average Vacancy Rate (%)

(From Apr 2022)



Sum of Bank Usage (FTE)

(From Apr 2022)



Sum of Agency Usage (FTE)

(From Apr 2022)



Average Net Change Rate (%)

(From Apr 2022)



Our People (Workforce)

Gloucestershire ICS Equality, Diversity and Inclusion (EDI) measures



ICS PROVIDERS

Filters

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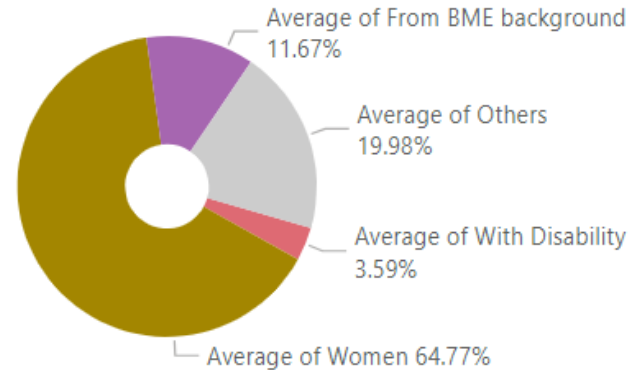
Disclaimer

The percentage values for women, BME staff, and staff with disabilities in leadership roles are accurate representations of their actual presence. It is important to note that the average percentage for BME staff may include women and staff with disabilities who fall under that category. The same principle applies to women and disability categories as well. The other category is included for visual clarity purposes only.

Proportion of staff in leadership roles (\geq Band 8C)

Latest data point
(Annual measures)

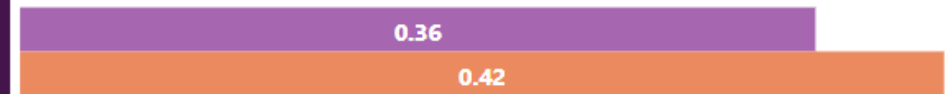
March 2023



Likelihood of BME & White candidates appointed from shortlisting

Data shown is from
NHS providers only

0.36 : 0.42

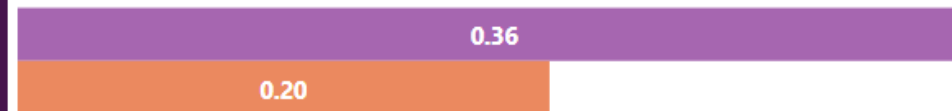


White candidates have 1.22 times greater chance than BME candidates
BME Candidates White candidates
Latest data point (Annual measures)
March 2023

Likelihood of candidates with and without disability appointed from shortlisting

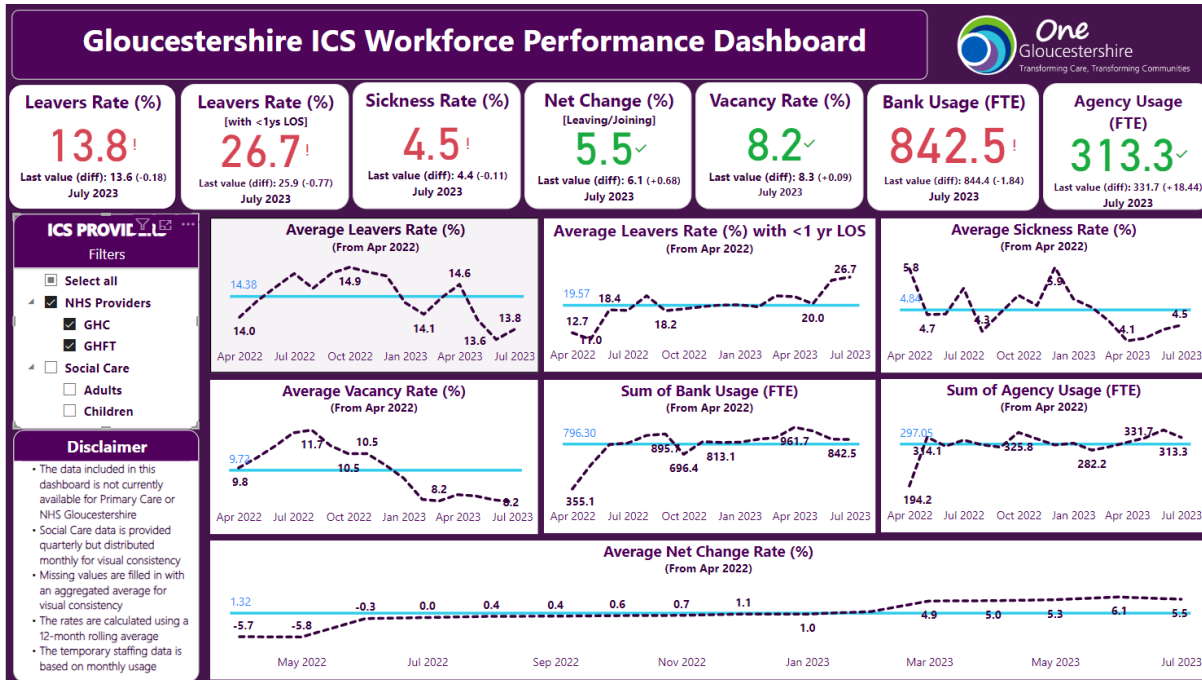
Data shown is from NHS
providers only

0.36 : 0.20

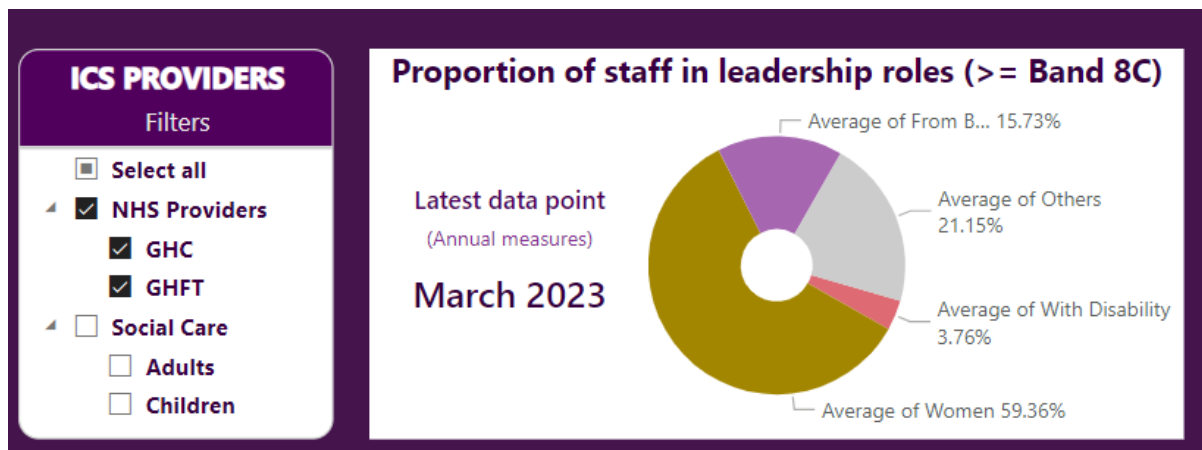
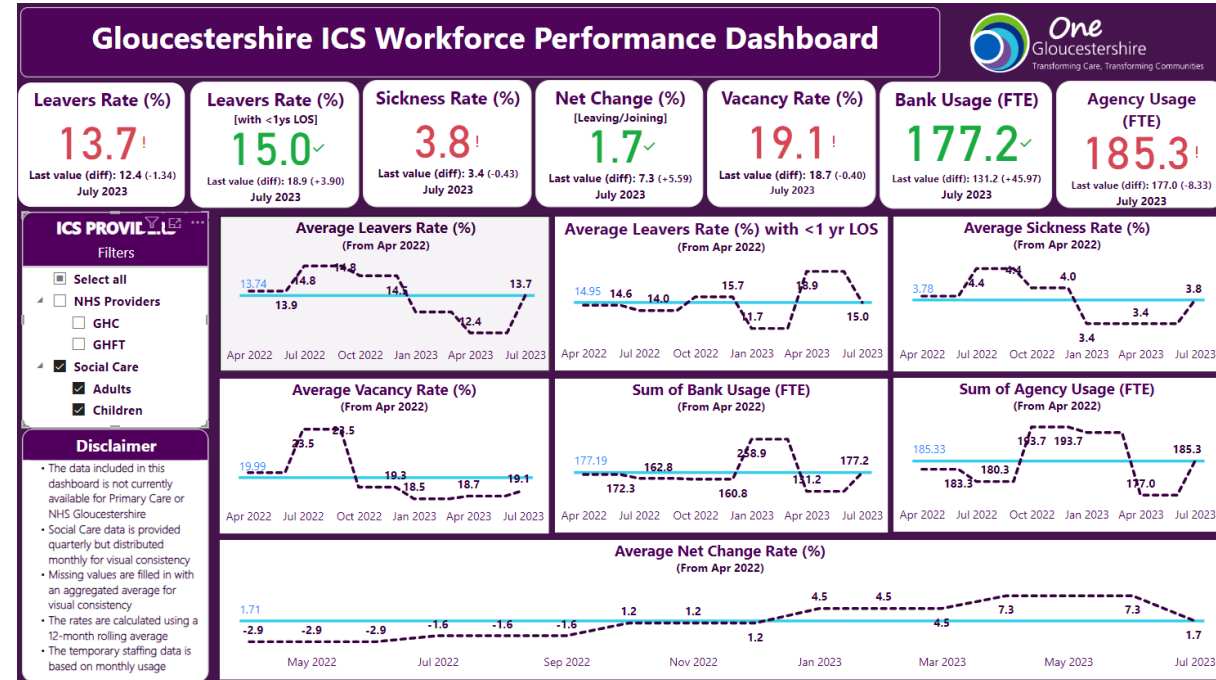


Candidates without disability have 0.82 times less chance than candidates with disability
Candidates with Disability Candidates without Disability
Latest data point (Annual measures)
March 2023

NHS providers data (GHC & GHFT)



Social Work data (Adults & Children)



Data definitions for the Key Performance Indicators

NHS Leaver Rate (S067a)	
Definition:	The % of staff who have left the NHS during a 12-month period
Purpose:	To monitor staff leaving the NHS to support retention and recruitment programmes.
Data source:	The Electronic Staff Record (ESR)
Inclusive criteria:	Assignment status as 'Acting Up, Active Assignment, Internal Secondment'
Calculation methodology:	$(\text{FTE of all staff leaving the NHS during the 12 month period} / \text{FTE of all staff in post at the beginning of the 12 month period}) * 100$
Leavers rate with short LOS	
Definition:	Proportion of all staff leaving the NHS that leave within one year (12 month rolling)
Purpose:	To monitor staff sustainability
Data source:	The Electronic Staff Record (ESR)
Required data:	Sum of leavers over the last 12 months data period in FTE
	Sum of leavers over the last 12 months data period in FTE but who have served for less than an year in that assignment
Sickness absence rate (S068a)	
Definition:	% of working hours lost due to sickness absence in a any one month
Purpose:	To monitor the health and wellbeing of NHS staff to support retention and well-being programmes
Data source:	The Electronic Staff Record (ESR)
Inclusive criteria:	Assignment category as 'Acting Up, Active Assignment, Internal Secondment'
Exclusive criteria:	Assignment category as bank, honorary, widow/widower
Calculation methodology:	$(\text{FTE Number of Days Sick (including non-working days)} / \text{FTE Number of Days available}) * 100$
Joiners and Leavers profile	
Definition:	Proportion of all staff net change (leaving/joining) the NHS each year (12 month total)
Purpose:	To monitor the joiners and leavers net change to help maintain a steady workforce.
Data source:	The Electronic Staff Record (ESR)
Required data:	Sum of staff in post at beginning of the data period in FTE
	Sum of leavers over 12 months data period in FTE
	Sum of starters over 12 months data period in FTE
Vacancy rate	
Definition:	SIP vs Establishment - all staff
Purpose:	To monitor the gap between the planned establishment and the actual staff in post.
Data source:	The Electronic Staff Record (ESR)
Required data:	Sum of establishment - ALL staff in FTE
	Sum of staff in post contracted - ALL staff in FTE
Temporary staffing usage	
Definition:	Sum of temporary staff (both agency and bank) usage in FTE
Purpose:	To monitor the use of temporary staffing to provide required health service
Data source:	??
Required data:	Sum of agency staff used with in the data period in FTE
	Sum of bank staff used with in the data period in FTE

Data definitions for the EDI indicators

Proportion of staff in leadership role (S071a)	
Definition:	Proportion of staff in senior leadership roles (AfC bands 8c and above, including executive board members) who are from a BME background, Women and with disability groups
Purpose:	To monitor our compliance with Public Sector Equality Duty (PSED), NHS Long Term Plan, NHS People Plan- moral and ethical responsibility to our workforce.
Data source:	Output of annual WRES and WDES collection , ESR
Inclusive criteria:	All AFC staff from Band 8C and above, VSM staff i.e., Board Level Director, Chief Executive, Clinical Director, Clinical Director - Medical, Director of Nursing , Finance Director, Medical Director and Other Executive Director
Calculation methodology:	(Number of staff from BME background / Total number of staff who are 8C and above +VSM) * 100
	(Number of staff who are women / Total number of staff who are 8C and above +VSM) * 100
	(Number of staff with disability/ Total number of staff who are 8C and above +VSM) * 100
Proportion of staff recruited from different background (S---	
Definition:	WRES – Relative likelihood of white applicants being appointed from shortlisting across all posts compared to BME applicants
	WDES – Relative likelihood of Disabled applicants being appointed from shortlisting compared to non-disabled applicants
Purpose:	To monitor the fair recruitment across the healthcare setting
Data source:	Output of annual WRES and WDES collection , ESR
Calculation methodology:	BME (Total number of BME candidates appointed/ Total number of BME candidates shortlisted)
	White (Total number of White candidates appointed/ Total number of White candidates shortlisted)
	With disability (Total number of candidates with disability appointed/ Total number of candidates with disability shortlisted)
	Without disability (Total number of candidates without disability appointed/ Total number of candidates without disability shortlisted)